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APPLICANTS
 Frank H. Speckhart, Knoxville, TN;
 Travis M. Kimmins, Newport News, VA;

**** CONTINUING DATA ******* *none RI*

**** FOREIGN APPLICATIONS ******* *none RI*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
 ** 05/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY TN	SHEETS DRAWING 6	TOTAL CLAIMS 41	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>RI</i> Initials			

ADDRESS
22465

TITLE
Occupant sensor for a vehicle restraint system

FILING FEE RECEIVED 746	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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